

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 10/25/	Z2021 Ending Date: 12/31/2021
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election [☐ 30 day after election ☐ year-end report ☐ dissolution
Brendan Sweeney Candidate Full Name (if applicable) City Council At-Large Office Sought and District 23 Federal Street, Apt. 2, Beverly. MA 01915 Residential Address E-mail: Brendan.S.Sweeney@gmail.com Phone # (optional):	The Committee to Elect Brendan Sweeney Committee Name Cory Nelson Name of Committee Treasurer 19 Federal Street, Apt. 1, Beverly, MA 01915 Committee Mailing Address E-mail: SweeneyforBeverly@gmail.com Phone # (optional):
SUMMARY BALANCI	E INFORMATION:
Line 1: Ending Balance from previous report	\$2,696.09
Line 2: Total receipts this period (page 3, line 11)	\$441.36
Line 3: Subtotal (line 1 plus line 2)	\$3,137.45
Line 4: Total expenditures this period (page 5, line	\$316.35
Line 5: Ending Balance (line 3 minus line 4)	\$2,821.10
Line 6: Total in-kind contributions this period (page	ge 6) \$0
Line 7: Total (all) outstanding liabilities (page 7)	\$4,782.45
Line 8: Name of bank(s) used: Santander Bank	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in a Signed under the penalties of perjury:	ontributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box	x only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in accincurred any liabilities nor made any expenditures on my behalf during this reporting	best of my knowledge and belief, a true and complete statement of all campaign finance cordance with the requirements of M.G.L. c. 55. I have not received any contributions,
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	in-kind contributions and liabilities for this reporting period and represents the candidate in accordance with the requirements of M.G.L. c. 55.

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

eport all receipts.	Please include your committee name and a pa	age number on eac	Organism ⁰ Employer
D (D	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	
10/28/2021	Brendan Sweeney 23 Federal Street, Apt. 2, Beverly, MA 01915	\$162.60	
11/2/2021	Brendan Sweeney 23 Federal Street, Apt. 2, Beverly, MA 01915	\$123.81	
10/28/2021	Matt Fannon 19 Federal Street, Beverly, MA 01915	\$100.00	
Line 9: Total Rec	eipts over \$50 (or listed above)	\$386.41	
Line 10: Total Re	ceipts \$50 and under* (not listed above)	\$54.95	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	\$441.36	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Data Dassivad	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(aiphanetical fisting required)		(101 001011011011011011011011011011011011
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			<u> </u>
Line 9: Total Rec	eipts over \$50 (or listed above)		
Line 10. Total Rea	ceipts \$50 and under* (not listed above)		
	RECEIPTS IN THE PERIOD		Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/2/2021	Facebook	1 Hacker Way, Menlo Park, CA 94025	Facebook Ad (10/25 - 11/2)	\$123.83
.0/28/2021	Robocent, Inc.	2129 Geneeral Booth Blvd #103, Virginia Beach, VA 23454	Voter Database	\$82.17
0/28/2021	Robocent, Inc.	2129 Geneeral Booth Blvd #103, Virginia Beach, VA 23454	Robocall	\$80.4
		Line 12: Total Expenditures of	over \$50 (or listed above)	\$286.
		Line 13: Total Expenditures \$	50 and under* (not listed above)	\$29.
	Enter on page 1, line 4	→ Line 14: TOTAL EXPENDI	TUDES IN THE PERIOD	\$316.

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized Page 4 above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Paid	(aiphabetical listing)	Address		
				A
				1.1
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50 a	nd under* (not listed above)	
	Enter on page 1 line 4 -	Line 14: TOTAL EXPEND	DITURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
0/25/2021	Brendan Sweeney	23 Federal Street, Apt. 2, Beverly, MA 01915	Liabilities carried over from previous report	\$4,466.10
2/31/2021	Brendan Sweeney	23 Federal Street, Apt. 2, Beverly, MA 01915	Out-of-pocket expenses 10/25/21 - 12/31/21	\$316.35